



Patent
Attorney's Docket No. 1009765-000053

RCE/##
JRW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Ruedi Hess

Application No.: 10/501,532

Filing Date: December 30, 2004

Title: SLING

) **MAIL STOP RCE**
)
) Group Art Unit: 3652
)
) Examiner: DEAN J. KRAMER
)
) Confirmation No.: 6367
)
)
)
)
)

**REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL LETTER**

MAIL STOP RCE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Customer Number **21839**

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 of the above-identified application and encloses the ☒ \$405 ☐ \$810 fee due under 37 C.F.R. § 1.17(e).

1. ☐ A. Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified in item 2 below.
- ☒ B. Applicant(s) previously submitted the following documents for which continued examination is requested:
- ☒ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on September 7, 2007.
- ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.

2. The following documents are enclosed with this submission:

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> Amendment/Reply | 10/16/2007 SZEWDIE1 00000116 10501532 |
| | 02 FC:2001 405.00 OP |
| <input type="checkbox"/> Affidavit(s)/Declaration(s) | |
| <input type="checkbox"/> Information Disclosure Statement | 10/16/2007 SZEWDIE1 00000116 10501532 |
| <input checked="" type="checkbox"/> Petition for Extension of Time | 01 FC:2252 170.00 OP |

3. ☒ Small entity status is hereby claimed.
- ☒ No additional claim fee is required.
- ☐ The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

					FEES
Examination Fee (1801)					\$ 810
	No. of Claims		Extra Claims	Rate	
Total Claims	18	20	0	x 50 (1202)	\$ 0
Independent Claims	2	3	0	x 210 (1201)	\$ 0
If multiple dependent claims are presented, add \$ 370					\$ 0
Total Fee					\$ 810
<input checked="" type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Application Fee					\$ 405
TOTAL FEE DUE					\$ 405

4. ☐ Charge _____ to Deposit Account No. **02-4800** for the fee due.
5. ☐ A check in the amount of _____ is enclosed for the fee due.
6. ☒ Charge \$ 575 to credit card for the fee due. Form PTO-2038 is attached.
7. ☒ The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BUCHANAN INGERSOLL & ROONEY PC

By: 

Michael Britton
Registration No. 47260

Date: October 15, 2007

P.O. Box 1404
Alexandria, VA 22313-1404
703 836 6620